

ORDER/NOTICE TO WITHHOLD INCOME FOR CHILD SUPPORT

State:	1a	<u>4a</u>	Original Order/Notice
Co./City/Dist. of:	1b	<u>4b</u>	Amended Order/Notice
Date of Order/Notice:	2	<u>4c</u>	Terminate Order/Notice
Court/Case Number:	3		

Employer/Withholder's Federal EIN Number:

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Employer/Withholder's Name:

6a

Employer/Withholder's Address:

6b

6c

6d

6e

Child(ren)'s Name(s): DOB

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RE: Employee/Obligor's Name (Last, First, MI):

* 7

Employee/Obligor's Social Security Number:

* 8

Employee/Obligor's Case Identifier:

* 9

Custodial Parent's Name (Last, First, MI):

10

Child(ren)'s Name(s): DOB

ORDER INFORMATION: This is an *Order/Notice to Withhold Income for Child Support* based upon an order for support from 12. By law, you are required to deduct these amounts from the above-named employee's/obligor's income until 13 even if the *Order/Notice* is not issued by your State.

☐ If checked, you are required to enroll the child(ren) identified above in any health insurance coverage available through the employee's/obligor's employment. 14

\$	15a	per	15b	in current support	
\$	16a	per	16b	in past-due support	21
\$	17a	per	17b	in medical support	
\$	18a	per	18b	in other (specify):	18c
\$	19a	per	19b	in other (specify):	19c
for a total of \$ 20a per 20b				to be forwarded to the payee below.	

You do not have to vary your pay cycle to be in compliance with the support order. If your pay cycle does not match the ordered support payment cycle, use the following to determine how much to withhold:

\$	22a	per weekly pay period.	\$	22c	per semimonthly pay period (twice a month).
\$	22b	per biweekly pay period (every two weeks).	\$	22d	per monthly pay period.

REMITTANCE INFORMATION:

You must begin withholding no later than the first pay period occurring 23 working days after the date of this *Order/Notice*. Send payment within 24 working days of the pay date/date of withholding. Your are entitled to deduct a fee to defray the cost of withholding. Refer to the laws governing the work state of the employee for the allowable amount. The total withheld amount, including your fee, cannot exceed 25 % of the employee's/obligor's aggregate disposable weekly earnings. For the purpose of the limitation on withholding, the following information is needed (see #9 on back).

When remitting payment, provide the pay date/date of withholding and the case identifier 26a.
If remitting by EFT/EDI, use this FIPS code: * 26b ; Bank routing code: * 26c
; Bank account number: * 26d.

Make it payable to: 27a

Send check to: 27b

27c

27d

Authorized by: 28a

☐ Judicial Officer ☐ Other (specify):

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Print Name: 28b

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ADDITIONAL INFORMATION TO EMPLOYERS AND OTHER WITHHOLDERS

☐

If checked you are required to provide a copy of this form to your employee, along with a blank *Request for Hearing Regarding Wage and Earnings Assignment* (form 1299.28) within 10 days.

1. **Priority:** Withholding under this *Order/Notice* has priority over any other legal process under State law against the same income. Federal tax levies in effect before receipt of this order have priority. If there are Federal tax levies in effect please contact the requesting agency listed below.
2. **Combining Payments:** You can combine withheld amounts from more than one employee/obligor's income in a single payment to each agency requesting withholding. You must, however, separately identify the portion of the single payment that is attributable to each employee/obligor.
3. **Reporting the Paydate/Date of Withholding:** You must report the paydate/date of withholding when sending the payment. The paydate/date of withholding is the date on which amount was withheld from the employee's wages. You must comply with the law of the state of employee's/obligor's principal place of employment with respect to the time periods within which you must implement the withholding order and forward the child support payments.
4. **Employee/Obligor with Multiple Support Withholdings:** If there is more than one *Order/Notice to Withhold Income for Child Support* against this employee/obligor and you are unable to honor all support Order/Notices due to Federal or State withholding limits, you must follow the law of the state of employee's/obligor's principal place of employment. You must honor all *Order/Notices* to the greatest extent possible. (see #9 below)
5. **Termination Notification:** You must promptly notify the payee when the employee/obligor is no longer working for you. Please provide the information requested and return a copy of this order/notice to the agency identified below.

EMPLOYEE'S/OBLIGOR'S NAME:

EMPLOYEE'S CASE IDENTIFIER:

DATE OF SEPARATION:

LAST KNOWN HOME ADDRESS:

NEW EMPLOYER'S ADDRESS:

Notice to Employee: Upon termination you are also required to provide this information to the agency identified below.

6. **Lump Sum Payments:** You may be required to report and withhold from lump sum payments such as bonuses, commissions, or severance pay. If you have any questions about lump sum payments, contact the person or authority below.
7. **Liability:** If you fail to withhold income as the *Order/Notice* directs, you are liable for both the accumulated amount you should have withheld from the employee/obligor's income and any other penalties set by State law, including being cited for contempt of court. You may, however deduct \$1 from the Obligor's earnings for each payment that you make. 30
8. **Anti-discrimination:** You are subject to a fine determined under State law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against any employee/obligor because of a child support withholding. 31
- 9.* **Withholding Limits:** You may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (15 U.S.C. § 1673(b)); or 2) the amounts allowed by the State of the employee's/obligor's principal place of employment. The Federal limit applies to the aggregate disposable weekly earnings (ADWE). ADWE is the net income left after making mandatory deductions such as: State, Federal, local taxes; Social Security taxes; and Medicare taxes; along with disability insurance and payments to public employees' retirement systems. After the Obligor's disposable earnings are known, withhold the amount required by the *Order/Notice*, **but never withhold more than 50 percent of the disposable earnings unless the court order specifies a higher percentage.** Federal law prohibits withholding more than 65 percent of disposable earning of an employee in any case. 32
10. **To the Employee/Obligor:** If you did not receive a blank *Request for Hearing Regarding Wage and Earnings Assignment* (form 1299.28), you may get one from the court clerk, the local child support agency, or the family law facilitator. 32
11. **Earnings for purposes of this Order/Notice include:** 1) wages, salary, bonuses, vacation pay, retirement pay, and commissions paid by an employer; 2) payments for services of independent contractors; 3) dividends, interest, rents, royalties, and residuals; 4) patent rights, and mineral or other natural resource rights; 5) any payments due as a result of written or oral contracts for services or sales, regardless of title; 6) payments due for workers' compensation temporary benefits, or payments from a disability or health insurance policy or program; and 7) any other payments or credits due regardless of source.
12. **Other:** 32

*NOTE: If you or your agent are served with a copy of this order in the state that issued the order, you are to follow the law of the state that issued this order with respect to these items.

Requesting Agency: 33a
33b-d

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If you or your employee/obligor have any questions, contact: 34a
by telephone at: 34b or by FAX at: 34c or by Internet at: 34d

INSTRUCTIONS TO COMPLETE *ORDER/NOTICE TO WITHHOLD INCOME FOR CHILD SUPPORT*

The *Order/Notice to Withhold Income for Child Support* is a mandatory standardized form used for income withholding in intrastate and interstate cases. **This form must be used for all child support and family support orders.**

The following are instructions to complete the *Order/Notice to Withhold Income for Child Support*. When completing the form, please include the following information.

- 1a. Name of State. (California)
- 1b.
2. Date the *Order/Notice* to Withhold is to be mailed.
3. Identifying number used by the court/agency issuing this *Order/Notice*, if appropriate.
- 4a-c. Check the appropriate case status of the *Order/Notice to Withhold*.
5. Employer/Withholder's nine-digit Federal employer identification number (if available). Include three-digit location code (if known).
- 6a. Employer/Withholder's name.
- 6b-e. Employer/Withholder's mailing address. (This may differ from the Employee/Obligor work site.)
7. Employee/Obligor's last name, first name, and middle initial (if known).
8. Employee/Obligor's Social Security Number.
9. Case identifier (or other identifier) used for recording the payment. (May be the same as #3.)
10. Custodial Parent's last name, first name, and middle initial (if known).
11. Child(ren)'s name(s) and date of birth listed in the support order.
Name of your jurisdiction. (County of the support order)

ORDER INFORMATION:

12. Name of State that issued the underlying child support order.
13. Termination date of the support order.
14. Check if the child support order requires enrollment of the child(ren) in any health insurance coverage available to the employee's/obligor's employment. The space on the form is provided for your instructions to the employer, i.e., "see attached medical support form."
- 15a. Dollar amount to be withheld for payment of current child support.
- 15b. Time period that corresponds to the amount in #15a (e.g., month).
- 16a. Dollar amount to be withheld for payment of past-due child support under your State law.
- 16b. Time period that corresponds to the amount in #16a (e.g., month).
- 17a. Dollar amount to be withheld for payment of medical support, as appropriate, based on the underlying order.
- 17b. Time period that corresponds to the amount in #17a (e.g., month).
- 18a. Dollar amount to be withheld for payment of miscellaneous obligations, if appropriate, based on the underlying order. **An order for family support may be included here.**
- 18b. Time period that corresponds to the amount in #18a (e.g., month).
- 18c. Describe the amount(s) represented in #18a separately by fee type (e.g., court fees).
- 19a. Dollar amount to be withheld for payment of miscellaneous obligations, if appropriate, based on the underlying order. **An order for family support may be included here.**
- 19b. Time period that corresponds to the amount in #19a (e.g., month).
- 19c. Describe the amount(s) represented in #19a separately by fee type (e.g., court fees).
- 20a. Total of #15a, #16a, #17a, #18a, and #19a.
- 20b. Time period that corresponds to the amount in #15b (e.g., month).
21. Check the "yes" box if arrears are 12 weeks or greater; otherwise check the "no" box.
- 22a. Amount an employer withholds if the employee is paid weekly.
- 22b. Amount an employer withholds if the employee is paid every two weeks.
- 22c. Amount an employer withholds if the employee is paid twice a month.
- 22d. Amount an employer withholds if the employee once a month.

REMITTANCE INFORMATION:

When completing numbers 23 through 25, please note the following:

If the *Order/Notice* is completed for an interstate withholding, apply the law of the state of the obligor's principal place of employment.

If the *Order/Notice* is completed for an intrastate withholding or the employer's agent is served with a copy in the state that issued the order, you are to follow the law of the state that issued this order.

23. Number of days in which the withholding must begin pursuant to California law is 10 days. This number has already been entered on the form.
24. Number of working days an employer or other payor of income must remit amounts withheld pursuant to California law is 10 days. This number has already been entered on the form.
25. Maximum percentage that can be withheld based on the applicable withholding limit under California law. If the employer is a Federal agency and you add the additional 5 percentage points allowed under the Federal Consumer Credit Protection Act to the percentage entered for #22 (i.e., 65%; or 55% instead of 50% if the obligor supports a second family), check #21 on the *Order/Notice* to indicate the support is 12 weeks or more in arrears. See paragraph 9 of the *Order/Notice* form for more information.
- 26a. Case identifier or other identifier. (May be the same as #3 and/or #9.)
- 26b. Federal Information Process Standard (FIPS) code for transmitting payments through EFT/EDI. The FIPS code is five characters that identifies the State and county. It is seven characters when it identifies the State, county, and a location within the county. It is necessary for centralized collections. Complete only for EFT/EDI transmission.
- 26c. Receiving agency's bank routing number. Complete only for EFT/EDI transmission.
- 26d. Receiving agency's bank account number. Complete only for EFT/EDI transmission.
- 27a. Name of the collection unit specified by the tribunal that issued the controlling order to which payments are made and the case identifier.
- 27b-d. Street address, City, and State of the collection unit identified in #27a.
- 28a. Signature of official(s) authorized to send the *Order/Notice*. This form must be authorized by a judicial officer unless it is being issued by a child support agency pursuant to Title IV-D of the Social Security Act. If issued by a child support agency, pursuant to Family Code section 5246(b), a signature is not required on the form. Check the appropriate box beneath the signature line and, if necessary, indicate that person's title or position.
- 28b. Print name of the official(s) authorized to send the *Order/Notice*.
29. Check the box if the employer is to provide a copy of the *Order/Notice* to the employee.
30. Penalty and/or citation for an employer who fails to comply with the *Order/Notice*. Your State law governs unless the obligor is employed in another State, in which case the law of the State in which he or she is employed governs.
31. Penalty and/or citation for an employer who discharges, refuses to employ, or disciplines an employee/obligor as a result of the *Order/Notice*. Your State law governs unless the obligor is employed in another State, in which case the law of the State in which he or she is employed governs.
32. The next two paragraphs provide notice to the employee/obligor concerning receipt of the *Request for Hearing Regarding Wage and Earnings Assignment* form and defines earnings to which the *Order/Notice* is applicable. There is nothing to enter in these paragraphs. Paragraph 12 provides space to furnish the employer or other payor with additional information.
- 33a. Name of the agency or court requesting the income withholding.
- 33b-d. Address of the agency or court requesting the income withholding.
- 34a. Name of the child support enforcement agency's contact person who an employer and/or employee/obligor may call for information regarding the *Order/Notice*.
- 34b. Telephone number of the contact person who an employer may call for information regarding the *Order/Notice*.
- 34c. Facsimile number for the person whose name appears in #34a.
- 34d. Internet address for the person whose name appears in #34a.

If the employer is a Federal Government agency the following instructions apply:

- Serve the *Order/Notice* upon the governmental agent listed in 5 CFR part 581, appendix A.
- Sufficient identifying information must be provided in order for the obligor to be identified. It is, therefore, recommended that the following information, if known and if applicable, be provided: (1) full name of the obligor; (2) date of birth; (3) employment number, Department of Veterans Affairs claim number, or civil service retirement claim number; (4) component of the government entity for which the obligor works, and the official duty station or worksite; and (5) status of the obligor, e.g., employee, former employee, or annuitant.
- You may withhold from a variety of income and forms of payment, including voluntary separation incentive payments (buy-out payments), incentive pay, and cash awards. For a more complete list see 5 CFR § 581.103.